

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F95000004667

FILED  
Apr 29, 2003  
Secretary of State

Entity Name: BWD AUTOMOTIVE CORPORATION

## Current Principal Place of Business:

11045 GAGE AVE.  
FRANKLIN PARK, IL 60131

## New Principal Place of Business:

## Current Mailing Address:

C/O 4500 DORR. STREET  
P.O. BOX 1000  
TOLEDO, OH 43697

## New Mailing Address:

FEI Number: 06-1043482      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

## Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: WHITED, HARRY  
Address: 741 BOSTON POST ROAD, SUITE 100  
City-St-Zip: GUILFORD, CT 06437 27

Title: VPS ( ) Delete  
Name: KELLER, STEVEN E  
Address: 4500 DORR. STREET/P.O. BOX 1000  
City-St-Zip: TOLEDO, OH 43697

Title: VPT ( ) Delete  
Name: PATON, A. GLENN  
Address: 4500 DORR ST/ P.O. BOX 1000  
City-St-Zip: TOLEDO, OH 43697

Title: VPD ( ) Delete  
Name: MADDEN, THOMAS  
Address: 4500 DORR ST/P.O. BOX 1000  
City-St-Zip: TOLEDO, OH 43697

Title: AT ( ) Delete  
Name: CZARKA, CHRISTOPHER J  
Address: 4500 DORR ST./P.O. BOX 1000  
City-St-Zip: TOLEDO, OH 43697

Title: AT (X) Delete  
Name: HINDE, CHARLES W  
Address: 4500 DORR ST. / P.O. BOX 1000  
City-St-Zip: TOLEDO, OH 43697

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHRISTOPHER J. CZARKA

AT

04/29/2003

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date